



MISSOURI DEPARTMENT OF AGRICULTURE  
DIVISION OF ANIMAL HEALTH  
**AGREEMENT FOR PERFORMANCE OF LIVESTOCK  
MARKET/SALE VETERINARY RESPONSIBILITIES**

I, \_\_\_\_\_, in cooperation with the Missouri Department of Agriculture, Division of Animal Health,  
do hereby agree to perform the responsibilities of a veterinarian at \_\_\_\_\_ in the state of Missouri.  
(NAME OF MARKET)

**GENERAL PROVISIONS:**

1. Will comply with all regulations adopted by the Missouri Department of Agriculture, Division of Animal Health, relating to operation of livestock markets/sales in the state of Missouri.
2. Shall perform all testing of livestock for disease, including any method of identifying animals in connection with disease.
3. Complete training successfully and be qualified to run the Brucella Buffered Antigen (B.B.A.) Card Test and Concentration Immunoassay Technology (CITE) test.
4. Inspect livestock markets/sales for cleanliness, good repair and proper disinfection of certain areas possibly contaminated by diseased livestock.
5. Inspect all livestock visually prior to sale and, if necessary, perform further diagnostic procedures to determine the health status. If it is necessary to draw blood in fulfillment of state or federal testing regulations for the sale, it will be done prior to sale.
6. Will not release any livestock from a livestock market/sale until the livestock have been handled, tested and treated as required by Animal Health laws and rules pertaining to the movement of livestock.
7. Finding any animal that is sick or suffering from a noninfectious disease either returned to farm of origin with or without a quarantine depending on the seriousness of the disease or illness; condemned, isolated and later destroyed or properly disposed of; or isolated and, if allowed to sell, an announcement must be made at the time of sale about the problem the animal is suffering.
8. Will be responsible for personally sealing or having designated approved personnel to seal all vehicles requiring official VS seals for proper shipment.
9. All official forms, certificates, documents or tags will be kept under exclusive control of the veterinarian, and will be signed by the veterinarian only at the time they are completed.
10. Blood samples for State-Federal laboratory confirmation will be submitted within five (5) days. All sample submission will be accompanied by complete and accurate test records, including back tags, ear tags, vaccination status, age, breed, sex and test results.
11. The veterinary inspector is subject to dismissal by the state veterinarian for neglect of duty in the enforcement of any provisions of Chapter 267 and 277 RSMo., or for misconduct while on official duty. Any market operator who desires to dismiss a veterinarian from his/her position shall notify the state veterinarian, who shall review the circumstances surrounding the proposed dismissal. The state veterinarian shall provide both the market operator and veterinarian an opportunity to appear and be heard. In the event that such circumstances cannot be satisfactorily resolved within thirty (30) days, the state veterinarian shall withdraw approval of the market veterinarian for that market/sale, unless it appears that the predominant reason for dismissal is a refusal by the market veterinarian to breach the above requirements or any other state or federal laws or requirements relating to the performance of official tests and inspections.

**REQUEST FOR APPROVAL**

By signing this agreement I acknowledge that I understand what is required and will abide by these regulations in performing my duties as a livestock market/sale veterinarian.

SIGNATURE OF VETERINARIAN	AGREEMENT CODE	LICENSE NUMBER	DATE
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I/We, the market management have read and fully understand all of the conditions of the aforementioned document agreed to by the veterinarian in our employ, and do hereby consent to all conditions, stipulations and possible penalties noted in the preceding agreement.

SIGNATURE OF MARKET/SALE OWNER	NAME OF MARKET	DATE
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**PRE-APPROVAL GRANTED (ON CHANGE OF OR NEW VETERINARIAN)**

**APPROVAL GRANTED**

SIGNATURE OF DISTRICT REPRESENTATIVE	DATE	SIGNATURE OF STATE VETERINARIAN	DATE
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